

SERIAL NUMBER 09/445,065	FILING DATE 12/01/99	CLASS 602	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. BEIERSDORF-5
-----------------------------	-------------------------	--------------	------------------------	-------------------------------------

APPLICANT
STEFAN BODENSCHATZ, BUXTEHUDE, FED REP GERMANY; THORSTEN HERZBERG,
HAMBURG, FED REP GERMANY.

CONTINUING DOMESTIC DATA***
VERIFIED

371 (NAT'L STAGE) DATA***
VERIFIED THIS APPLN IS A 371 OF PCT/EP98/03168 05/28/98

FOREIGN APPLICATIONS***
VERIFIED FED REP GERMANY 197 24 322.3 06/10/97

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/31/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no Verified and Acknowledged <u>Examiner's Initials</u> <u>Initials</u>	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DEX	SHEETS DRAWING 2	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 1
--	---	----------------------------	------------------------	-----------------------	----------------------------

ADDRESS
SPRUNG KRAMER SCHAEFER & BRISCOE
660 WHITE PLAINS ROAD
TARRYTOWN NY 10591-5411

TITLE
ARM BANDAGE ENCOMPASSING THE SHOULDER

FILING FEE RECEIVED \$840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-------------------------------------	---	---

09 / 445065

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 445065	RECEIPT DATE:	12 / 01 / 99
IA NUMBER:	PCT/ EP98 / 03168	IA FILING DATE:	05 / 28 / 98
FAMILY NAME:	BODENSCHATZ	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	STEFAN	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	06 / 10 / 97
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	BEIERSDORF 5	COUNTRY:	EPX
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	TELEPHONE	
		FAX	

NAME: WILLIAM C GERSTENZANG
NORRIS MCLAUGHLIN & MARCUS
STREET: 660 WHITE PLAINS ROAD

CITY: TERRYTOWN
STATE/COUNTRY: NY ZIP: 10591
EMAIL:

APPLICATION TITLES:
BANDAGE FOR THE ARM WITH ENCLOSURE FOR THE SHOULDER

See IATitle.

TAB TO LAST POSITION, PUSH SEND



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9425

SERIAL NUMBER 09/445,065	FILING DATE 12/01/1999 RULE	CLASS 602	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. BEIERSDORF-5
------------------------------------	---	---------------------	-------------------------------	--

APPLICANTS

STEFAN BODENSCHATZ, BUXTEHUDE, GERMANY;
THORSTEN HERZBERG, HAMBURG, GERMANY;

**** CONTINUING DATA *******

THIS APPLICATION IS A 371 OF PCT/EP98/03168 05/28/1998

**** FOREIGN APPLICATIONS *******

GERMANY 197 24 322.3 06/10/1997

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 2	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____	Initials _____		

ADDRESS

Kurt G Briscoe
Norrisl McLaughlin & Marcus
220 East 42nd Street
30th Floor
New York ,NY 10017

TITLE

BANDAGE FOR THE ARM WITH ENCLOSURE FOR THE SHOULDER

FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit